

**Fill in this information to identify the case:**Debtor name **JMC Mechanical, Inc.**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF OHIO**Case number (if known) **17-32318**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims****3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>Ace Hardware</b> <b>4405 State Route 66</b> <b>Minster, OH 45865</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>\$100.77</b>
3.2	Nonpriority creditor's name and mailing address <b>Air Control Products</b> <b>1201 Essic Ave.</b> <b>Columbus, OH 43201</b>  Date(s) debt was incurred <u>Various</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>\$58,896.77</b>
3.3	Nonpriority creditor's name and mailing address <b>Airgas USA</b> <b>1590 McClain Rd</b> <b>Lima, OH 45804</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>\$5,650.74</b>
3.4	Nonpriority creditor's name and mailing address <b>Allied Supply</b> <b>460 S Main</b> <b>Lima, OH 45804</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>\$3,882.40</b>

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.5	<b>Nonpriority creditor's name and mailing address</b> <b>American Air Balance</b> <b>10245 Harrison Rd</b> <b>OH 45740</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,500.00</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Amerigas</b> <b>3380 S Dixie</b> <b>Lima, OH 45804</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$195.18</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Andrew Limbert</b> <b>16956 Blackhood Creek</b> <b>Wapakoneta, OH 45895</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,353.92</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Anthem Life Insurance Company</b> <b>PO Box 182361</b> <b>Columbus, OH 43218</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$147.84</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>ARC</b> <b>546 S Collett</b> <b>Lima, OH 45805</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,671.04</b>
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Barnettbates Corp</b> <b>500 Mills Rd</b> <b>Joliet, IL 60433</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,670.00</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Bay Insulation</b> <b>4755 W 15th</b> <b>Cleveland, OH 44135</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$53,146.67</b>

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Bell &amp; Blair, LLC</b> <b>724 S Arlington</b> <b>Akron, OH 44306</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$627.00</b>
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Buckeye Mechanical Insulation</b> <b>1955 Reservoir Rd</b> <b>Hilliard, OH 43026</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$45,804.00</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Builders Exchange</b> <b>2077 Embury Park Rd</b> <b>Dayton, OH 45414</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,395.00</b>
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Cincinnati Precision Machinery, Inc</b> <b>9083 Sutton Place</b> <b>Hamilton, OH 45011</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Denied and disputed claim in Auglaize County</b></u> <u><b>Common Pleas Court case No. 2017 CV 0030</b></u> <u><b>Claims in excess of \$25,000</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Columbus Fasteners</b> <b>1150 Chesapeake Ave</b> <b>Columbus, OH 43212</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,246.39</b>
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Concrete Coring Company</b> <b>7210 Edington Dr</b> <b>Cincinnati, OH 45249</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,339.50</b>
3.18	<b>Nonpriority creditor's name and mailing address</b> <b>D.D.T. A. Services, Inc.</b> <b>461 East Taggart St</b> <b>East Palestine, OH 44413</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$196.50</b>

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Darrell Shoup</b> <b>1602 St. Rt. 501</b> <b>Wapakoneta, OH 45895</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$517.75</b>
3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Dean Klosterman</b> <b>15086 St. Rt. 116</b> <b>Saint Marys, OH 45885</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,670.00</b>
3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Diversified Steel Trading, Inc</b> <b>610 Burns Ave</b> <b>Cincinnati, OH 45215</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$32,901.68</b>
3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Drug Free Safety</b> <b>Comp Mgmt</b> <b>PO Box 884</b> <b>Dublin, OH 43017</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,660.00</b>
3.23	<b>Nonpriority creditor's name and mailing address</b> <b>F. Randolph Sleeper</b> <b>637 OVERBROOK DR COLUMBUS</b> <b>Columbus, OH 43214</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>President of Plaintiff FMI Enterprises, LLC.</b></u> <u><b>Denied and disputed claim in Auglaize County Common Please Court</b></u> <u><b>case No. 2017 CV 0030</b></u> <u><b>Claims in excess of \$25,000</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Fastenal Co.</b> <b>50 Sawyer Pkwy</b> <b>Suite D</b> <b>Mansfield, OH 44903</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,611.88</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>First Call Auto Supply</b> <b>10 E Pearl St</b> <b>Wapakoneta, OH 45895</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$669.93</b>

Name

3.26	Nonpriority creditor's name and mailing address <b>FMI ENTERPRISES, LLC. c/o Dinsmore Agent Co. 191 Mationwide Boulevard, Swite 300 Columbus, OH 43215</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <b><u>Denied and disputed claim in Auglaize County Common Please Court case No. 2017 CV 0030 Claims in excess of \$25,000</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.27	Nonpriority creditor's name and mailing address <b>Four U Office Supply 1640 Industrial Dr Celina, OH 45822</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$83.58</b>
3.28	Nonpriority creditor's name and mailing address <b>Grainger 2321 Needmore Rd Dayton, OH 45414</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$583.57</b>
3.29	Nonpriority creditor's name and mailing address <b>Guardian PO Box 254888 Sacramento, CA 95865</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,483.94</b>
3.30	Nonpriority creditor's name and mailing address <b>HILTI Inc 3811 Twin Creeks Dr Columbus, OH 43024</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$967.50</b>
3.31	Nonpriority creditor's name and mailing address <b>JCrane Inc 10315 W US 36 Covington, OH 45318</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,171.20</b>
3.32	Nonpriority creditor's name and mailing address <b>Jeffrey P Limbert 10096 Glynwod Dr Wapakoneta, OH 45895</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,186.18</b>

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.33	Nonpriority creditor's name and mailing address <b>Kara Ahrens 1724 Goettemoeller Maria Stein, OH 45860</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$116.59</b>
3.34	Nonpriority creditor's name and mailing address <b>Kevin McGovern Associates Inc. 1562 West First Ave Columbus, OH 43212</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,718.50</b>
3.35	Nonpriority creditor's name and mailing address <b>Kevin Ott 7852 Glynwood Rd Wapakoneta, OH 45895</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$798.80</b>
3.36	Nonpriority creditor's name and mailing address <b>Lininger Trailer Sales 14284 Glynwood Rd Wapakoneta, OH 45895</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$132.99</b>
3.37	Nonpriority creditor's name and mailing address <b>MacDonald Supply 425 East Lincoln Street Findlay, OH 45840</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,717.45</b>
3.38	Nonpriority creditor's name and mailing address <b>Macomb Group 2501 Central Point Pkwy Lima, OH 45804</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$27,135.35</b>
3.39	Nonpriority creditor's name and mailing address <b>Main Line Supply 1918 Bible Rd Lima, OH 45804</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$26,015.11</b>

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.40	Nonpriority creditor's name and mailing address <b>Matandy Steel &amp; Metal Products</b> <b>1200 Central Ave</b> <b>Hamilton, OH 45011</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$24,940.03</b>
3.41	Nonpriority creditor's name and mailing address <b>McMaster Carr Supply</b> <b>PO Box 94930</b> <b>Cleveland, OH 44101</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,383.95</b>
3.42	Nonpriority creditor's name and mailing address <b>Merit Insulation Company</b> <b>504 N Maple St</b> <b>Payne, OH 45880</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,772.40</b>
3.43	Nonpriority creditor's name and mailing address <b>Mesco Corporation</b> <b>4880 St. Rt 66</b> <b>New Bremen, OH 45869</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$102.23</b>
3.44	Nonpriority creditor's name and mailing address <b>Midwest Pipe and Steel</b> <b>PO Box 11558</b> <b>Fort Wayne, IN 46859</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,151.59</b>
3.45	Nonpriority creditor's name and mailing address <b>Northern Safety Co</b> <b>PO Box 4250</b> <b>Utica, NY 13504</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$250.39</b>
3.46	Nonpriority creditor's name and mailing address <b>Plasma Automation Inc</b> <b>1801 Arctic Ave</b> <b>Bohemia, NY 11716</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,329.56</b>

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.47	<b>Nonpriority creditor's name and mailing address</b> <b>Precision Air Balance</b> <b>15500 Brookpark Rd</b> <b>Cleveland, OH 44135</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,600.00</b>
3.48	<b>Nonpriority creditor's name and mailing address</b> <b>Professional Computer Company</b> <b>3255 Saint Johns Rd</b> <b>Suite C</b> <b>Lima, OH 45804</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,718.50</b>
3.49	<b>Nonpriority creditor's name and mailing address</b> <b>RRR Tire Service</b> <b>13851 Cemetary Rd</b> <b>Wapakoneta, OH 45895</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,483.84</b>
3.50	<b>Nonpriority creditor's name and mailing address</b> <b>Safety Professionals LLC</b> <b>1640 Franklin Ave</b> <b>Kent, OH 44240</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,770.00</b>
3.51	<b>Nonpriority creditor's name and mailing address</b> <b>Sams Club/GEMB</b> <b>1150 Greely Chapel Rd</b> <b>Lima, OH 45804</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$718.24</b>
3.52	<b>Nonpriority creditor's name and mailing address</b> <b>Stoermer Anderson Inc</b> <b>6244 Executive Blvd</b> <b>Dayton, OH 45424</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,000.00</b>
3.53	<b>Nonpriority creditor's name and mailing address</b> <b>Sunbelt Rentals</b> <b>7257 E State Route 37</b> <b>Sunbury, OH 43074</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,933.96</b>



Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.54	<b>Nonpriority creditor's name and mailing address</b> <b>Time Warner Cable</b> <b>1015 Olentangy River Rd</b> <b>Columbus, OH 43212</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$295.56</b>
3.55	<b>Nonpriority creditor's name and mailing address</b> <b>Tradesman International</b> <b>2312 Village Park Court</b> <b>Mansfield, OH 44906</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,641.25</b>
3.56	<b>Nonpriority creditor's name and mailing address</b> <b>Trane</b> <b>315 Falls Creek Dr</b> <b>Vandalia, OH 45377</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$294,185.31</b>
3.57	<b>Nonpriority creditor's name and mailing address</b> <b>Travelers</b> <b>One Tower Square</b> <b>Hartford, CT 06183</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$842.17</b>
3.58	<b>Nonpriority creditor's name and mailing address</b> <b>USI Insurance Services LLC</b> <b>200 Summit Lake Dr</b> <b>Suite 350</b> <b>Valhalla, NY 10595</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,144.00</b>
3.59	<b>Nonpriority creditor's name and mailing address</b> <b>Valley Interior Systems</b> <b>3840 Fisher Road</b> <b>Columbus, OH 43228</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,500.00</b>
3.60	<b>Nonpriority creditor's name and mailing address</b> <b>Verizon Wireless</b> <b>3292 Elida Rd</b> <b>Suite 500</b> <b>Lima, OH 45805</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,459.44</b>

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

3.61	Nonpriority creditor's name and mailing address <b>Waibel Energy Systems Inc</b> <b>815 Falls Creek Dr</b> <b>Vandalia, OH 45377</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$531,966.36</b>
3.62	Nonpriority creditor's name and mailing address <b>Waste Management</b> <b>1550 E 4th St</b> <b>Lima, OH 45804</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$272.05</b>
3.63	Nonpriority creditor's name and mailing address <b>West Central Ohio Regional</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$64.00</b>
3.64	Nonpriority creditor's name and mailing address <b>Western OH True Value Hardware</b> <b>04405 St. Rt. 66</b> <b>Minster, OH 45865</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,174.76</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Eric B. Kjellander (0096219)</b> <b>191 West Nationwide Blve Suite 300</b> <b>Columbus, OH 43215</b>	Line <u>3.26</u> <input type="checkbox"/> Not listed. Explain ____	—
4.2	<b>Linda L. Woeber (0027124)</b> <b>36 East Seventh Street, Suite 2100</b> <b>Montgomery, Rennie &amp; Jonson</b> <b>Attorneys at Law</b> <b>Cincinnati, OH 45202</b>	Line <u>3.15</u> <input type="checkbox"/> Not listed. Explain ____	—
4.3	<b>Peter W. Hahn (0070202)</b> <b>DINSMORE &amp; SHOHL, LLP</b> <b>191 West Nationwide Blvd. Suite 300</b> <b>Columbus, OH 43215</b>	Line <u>3.26</u> <input type="checkbox"/> Not listed. Explain ____	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1	5a. \$	<b>0.00</b>
5b. Total claims from Part 2	5b. + \$	

Debtor **JMC Mechanical, Inc.**  
Name

Case number (if known) **17-32318**

**5c. Total of Parts 1 and 2**  
Lines 5a + 5b = 5c.

1,260,665.31

5c.	\$	<b>1,260,665.31</b>
-----	----	---------------------